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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 1488

|                             |                                       |              |                        |                                      |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/055,915 | FILING DATE<br>01/28/2002<br><br>RULE | CLASS<br>514 | GROUP ART UNIT<br>1614 | ATTORNEY<br>DOCKET NO.<br>01197.0227 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

Shaun Jordan, Germantown, MD;

Tetsuro Kikuchi, Tokushima-shi, JAPAN;  
Katsura Tottori, Kamiita-cho, JAPAN; Tsuyoshi Hirose, Tokushima-shi, JAPAN;  
Yasufumi Uwahodo, Tokushima-shi, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\*** *PS*  
This appln claims benefit of 60/331,370 01/29/2001 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
**\*\* 02/26/2002**

|   |   |                           |                        |                       |                            |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no | 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY<br>MD | SHEETS<br>DRAWING<br>0 | TOTAL<br>CLAIMS<br>32 | INDEPENDENT<br>CLAIMS<br>1 |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|

Verified and Acknowledged *PS*  
Examiner's Signature *PS* Initials

ADDRESS  
Finnegan, Henderson, Farabow,  
Garrett & Dunner, L.L.P.  
1300 I Street, N.W.  
Washington, DC  
20005-3315

TITLE  
5HT1a Receptor subtype agonist

|            |   |  |
|------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT | <input type="checkbox"/> All Fees                              |
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